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14. ABSTRACT

Background: Chronically ill patients often experience multiple hospitalizations. Oncology patients have been shown to have more readmissions to the hospital than non-oncology patients. Recent reports estimate a \$17.4 billion cost burden is associated with readmissions within 30 days of discharge. Evidence suggests that one way to help patients take control of their health and avoid readmission is by bolstering behaviors that foster self-efficacy and sustain a patient's ability to manage his/her health, also known as patient engagement. Strategically providing education, resources, and knowledge assessments related to patient health conditions and treatments at the bedside have been shown to impact patient engagement. One reliable way of measuring patient engagement is by evaluating patient responses to the Patient Activation Measure (PAM) survey. Patient activation is a reliable precursor to patient engagement, whereby increased PAM scores have demonstrated improved levels of self-care management, health outcomes, and decreased readmissions.

<u>Purpose:</u> The purpose of this project was to describe the impact of nurse-driven strategies on PAM scores and readmission rates on an inpatient oncology unit at a large military medical center. A secondary objective was to compile observations and staff feedback into lessons-learned to be shared as a subsequent presentation.

<u>Methods:</u> This project was guided by the Plan-Do-Study-Act process improvement framework and utilized a pre-post design. Benchmark PAM scores and readmission rates were obtained prior to project implementation. PAM scores and readmission rates were obtained during and following implementation of bedside handoffs, teachbacks, and discharge bundles.

<u>Conclusion:</u> Both the benchmark group and post-implementation group of oncology patients had high PAM scores. Although statistical significance was not evident for increased PAM scores or decreased readmission rates, the results of this QIP are of important clinical value for the unit.

15. SUBJECT TERMS

Patient engagement, oncology readmissions, bedside handoffs, discharge bundles, teach backs.

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Describing Patient Engagement and Readmission Rates at a Large Navy Medical Center

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This project was derived from an approved Naval Medical Center Portsmouth IRB Protocol (NMCP.2014.0069).

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